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Bib Data Sheet

CONFIRMATION NO. 4480

SERIAL NUMBER 09/535,161	FILING DATE 03/24/2000 RULE	CLASS 379	GROUP ART UNIT 2644	ATTORNEY DOCKET NO. 78-1
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**APPLICANTS**

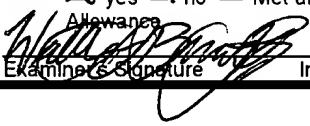
Loubaris Mohamed Faical, Rabat, MOROCCO;

**\*\* CONTINUING DATA \*\*\*\*\***

None WFB 12/19/03

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***FRANCE 96/11953 09/24/1996 WFB 12/19/03  
FRANCE PCT/FR97/01656 09/19/1997**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***

\*\* 05/12/2000

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MOROCCO	SHEETS DRAWING 3	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verifier and Acknowledged Examiner's Signature  Initials				

**ADDRESS**

23772

**TITLE**

Electronic switching system

FILING FEE RECEIVED 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 96/11953 09/24/1996 FRANCE PCT/FR97/01656 09/19/1997				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 05/12/2000				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MOROCCO	SHEETS DRAWING 3	TOTAL CLAIMS 20
INDEPENDENT CLAIMS 1				
<b>ADDRESS</b> CROWELL & MORING, L.L.P. P.O. BOX 14300 WASHINGTON ,DC 20044-4300				
<b>TITLE</b> Electronic switching system				
FILING FEE RECEIVED 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		